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# HOUSE BILL No. 1459

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## DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 5-10-8.

**Synopsis:** Former legislator health benefits. Removes the statutory authority of the speaker of the house of representatives and the president pro tempore of the senate to elect to pay any part of the health insurance premium of a former legislator after December 31, 2005. Repeals a health insurance plan for former legislators enacted in 2001. Voids any election to pay the premiums of former legislators made before January 1, 2006. Permits a former legislator or spouse to continue in the group health insurance program if the former legislator or spouse pays the entire premium charged for the group health insurance program.

**Effective:** January 1, 2006.

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### Woodruff

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January 18, 2005, read first time and referred to Committee on Rules and Legislative Procedures.

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First Regular Session 114th General Assembly (2005)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2004 Regular Session of the General Assembly.

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**HOUSE BILL No. 1459**



A BILL FOR AN ACT to amend the Indiana Code concerning the general assembly.

*Be it enacted by the General Assembly of the State of Indiana:*

1 SECTION 1. IC 5-10-8-8 IS AMENDED TO READ AS FOLLOWS  
2 [EFFECTIVE JANUARY 1, 2006]: Sec. 8. (a) This section applies  
3 only to the state and employees who are not covered by a plan  
4 established under section 6 of this chapter.  
5 (b) After June 30, 1986, the state shall provide a group health  
6 insurance plan to each retired employee:  
7 (1) whose retirement date is:  
8 (A) after June 29, 1986, for a retired employee who was a  
9 member of the field examiners' retirement fund;  
10 (B) after May 31, 1986, for a retired employee who was a  
11 member of the Indiana state teachers' retirement fund; or  
12 (C) after June 30, 1986, for a retired employee not covered by  
13 clause (A) or (B);  
14 (2) who will have reached fifty-five (55) years of age on or before  
15 the employee's retirement date but who will not be eligible on that  
16 date for Medicare coverage as prescribed by 42 U.S.C. 1395 et  
17 seq.;



- 1 (3) who will have completed twenty (20) years of creditable
- 2 employment with a public employer on or before the employee's
- 3 retirement date, ten (10) years of which shall have been
- 4 completed immediately preceding the retirement; and
- 5 (4) who will have completed at least fifteen (15) years of
- 6 participation in the retirement plan of which the employee is a
- 7 member on or before the employee's retirement date.

8 (c) The state shall provide a group health insurance program to each  
 9 retired employee:

- 10 (1) who is a retired judge;
- 11 (2) whose retirement date is after June 30, 1990;
- 12 (3) who is at least sixty-two (62) years of age;
- 13 (4) who is not eligible for Medicare coverage as prescribed by 42
- 14 U.S.C. 1395 et seq.; and
- 15 (5) who has at least eight (8) years of service credit as a
- 16 participant in the Indiana judges' retirement fund, with at least
- 17 eight (8) years of that service credit completed immediately
- 18 preceding the judge's retirement.

19 (d) The state shall provide a group health insurance program to each  
 20 retired employee:

- 21 (1) who is a retired participant under the prosecuting attorneys
- 22 retirement fund;
- 23 (2) whose retirement date is after January 1, 1990;
- 24 (3) who is at least sixty-two (62) years of age;
- 25 (4) who is not eligible for Medicare coverage as prescribed by 42
- 26 U.S.C. 1395 et seq.; and
- 27 (5) who has at least ten (10) years of service credit as a participant
- 28 in the prosecuting attorneys retirement fund, with at least ten (10)
- 29 years of that service credit completed immediately preceding the
- 30 participant's retirement.

31 (e) The state shall make available a group health insurance program  
 32 to each former member of the general assembly or surviving spouse of  
 33 each former member, if the former member:

- 34 (1) is no longer a member of the general assembly;
- 35 (2) is not eligible for Medicare coverage as prescribed by 42
- 36 U.S.C. 1395 et seq. or, in the case of a surviving spouse, the
- 37 surviving spouse is not eligible for Medicare coverage as
- 38 prescribed by 42 U.S.C. 1395 et seq.; and
- 39 (3) has at least ten (10) years of service credit as a member in the
- 40 general assembly.

41 A former member or surviving spouse of a former member who obtains  
 42 insurance under this section is responsible for paying both the

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1 employer and the employee share of the cost of the coverage.

2 (f) The group health insurance program required under subsections

3 (b) through (e) must be equal to that offered active employees. The

4 retired employee may participate in the group health insurance program

5 if the retired employee pays an amount equal to the employer's and the

6 employee's premium for the group health insurance for an active

7 employee and if the retired employee within ninety (90) days after the

8 employee's retirement date files a written request for insurance

9 coverage with the employer. ~~However,~~ **Except as provided in**

10 **subsection (k),** the employer may elect to pay any part of the retired

11 employee's premium with respect to insurance coverage under this

12 chapter.

13 (g) Except as provided in subsection (j), a retired employee's

14 eligibility to continue insurance under this section ends when the

15 employee becomes eligible for Medicare coverage as prescribed by 42

16 U.S.C. 1395 et seq., or when the employer terminates the health

17 insurance program. A retired employee who is eligible for insurance

18 coverage under this section may elect to have the employee's spouse

19 covered under the health insurance program at the time the employee

20 retires. If a retired employee's spouse pays the amount the retired

21 employee would have been required to pay for coverage selected by the

22 spouse, the spouse's subsequent eligibility to continue insurance under

23 this section is not affected by the death of the retired employee. The

24 surviving spouse's eligibility ends on the earliest of the following:

25 (1) When the spouse becomes eligible for Medicare coverage as

26 prescribed by 42 U.S.C. 1395 et seq.

27 (2) When the employer terminates the health insurance program.

28 (3) Two (2) years after the date of the employee's death.

29 (4) The date of the spouse's remarriage.

30 (h) This subsection does not apply to an employee who is entitled

31 to group insurance coverage under IC 20-6.1-6-1(c). An employee who

32 is on leave without pay is entitled to participate for ninety (90) days in

33 any health insurance program maintained by the employer for active

34 employees if the employee pays an amount equal to the total of the

35 employer's and the employee's premiums for the insurance.

36 (i) An employer may provide group health insurance for retired

37 employees or their spouses not covered by this section and may provide

38 group health insurance that contains provisions more favorable to

39 retired employees and their spouses than required by this section. A

40 public employer may provide group health insurance to an employee

41 who is on leave without pay for a longer period than required by

42 subsection (h).

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1 (j) An employer may elect to permit former employees and their  
 2 spouses, including surviving spouses, to continue to participate in a  
 3 group health insurance program under this chapter after the former  
 4 employee (who is otherwise qualified under this chapter to participate  
 5 in a group insurance program) or spouse has become eligible for  
 6 Medicare coverage as prescribed by ~~42 U.S.C.A.~~ U.S.C. 1395 et seq.  
 7 ~~An employer who makes an election under this section may require a~~  
 8 ~~person who continues coverage under this subsection to participate in~~  
 9 ~~a retiree health benefit plan developed under section 8.3 of this chapter.~~

10 (k) **The speaker of the house of representatives and the**  
 11 **president pro tempore of the senate may not elect to pay any part**  
 12 **of the premium for insurance coverage under this chapter with**  
 13 **respect to a former member of the general assembly or the spouse**  
 14 **of a former member of the general assembly.**

15 SECTION 2. THE FOLLOWING ARE REPEALED [EFFECTIVE  
 16 JANUARY 1, 2006]: IC 5-10-8-8.2; IC 5-10-8-8.3; IC 5-10-8-8.4.

17 SECTION 3. [EFFECTIVE JANUARY 1, 2006] (a)  
 18 **Notwithstanding any law, an election made before January 1, 2006,**  
 19 **by a speaker of the house of representatives or a president pro**  
 20 **tempore of the senate under IC 5-10-8 or IC 5-10-8-8.2 (before its**  
 21 **repeal) to pay any part of the premium for insurance coverage**  
 22 **with respect to a former member of the general assembly or the**  
 23 **spouse of a former member of the general assembly is void.**

24 (b) **Nothing in this act shall be construed to prohibit a former**  
 25 **member of the general assembly or spouse of a former member of**  
 26 **the general assembly who otherwise qualifies for health insurance**  
 27 **coverage under IC 5-10-8 from participating in the group health**  
 28 **insurance program under IC 5-10-8-8, as amended by this act, so**  
 29 **long as the former member or spouse of a former member of the**  
 30 **general assembly pays the entire premium with respect to the**  
 31 **insurance coverage.**

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